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# PATENT APPLICATION TRANSMITTAL

II St III Veritor	ASSAI GOVAII
Title	PHASED-ARRAY FOR TISSUE TREATMENT
Express Mail Label No.	EL 064542690 LIS

BIO-5044

Attorney Docket No.

	al applications under 37 CFR 3(b))	Express Mail Lab	el No.	EL 961542680 L	JS	328
·	N ELEMENTS		ADD	RESS TO:	Mail Stop Patent Application	
See MPEP Chapter 600 concerning utility patent application				Commissioner for Patents		
contents.				P.O. Box 1450 Alexandria, VA 22313-1450	<b>1</b>	
1 X Fee Transmi	ttal Form (e.g., PTO	/SB/17)	7	CD-ROM or	r CD-R in duplicate, large	
	nal and a duplicate for fee p		_	_	m (Appendix)	
	ims small entity stat	us.				
<ol><li>Specification</li></ol>			Nucleotide and/or Amino Acid Sequence			
	ement set forth below) itle of the Invention		Submission (if applicable, all necessary)			
	nce to Related Applica	ations	a. ☐ Computer Readable Form (CRF) b. ☐ Specification Sequence Listing on:			
	egarding Fed sponsore		i. CD-ROM or CD-R (2 copies); or			
<ul> <li>Reference to</li> </ul>	sequence listing, a tal		ii. paper			
	gram listing appendix		c. Statement verifying identity of above copies			
	of the Invention ry of the Invention			A C C C B B D A A I	IVING ADDITION DA	DTC
	tion of the Drawings <i>(ii</i>	f filed)		_	YING APPLICATION PA Papers (cover sheet & document	
- Detailed Des		,			B(b) Statement  Power of	
<ul><li>Claim(s)</li></ul>			```		is an assignee)	
- Abstract of th	e Disclosure				slation Document (if applica	ble)
. 57		01 1 17	12.⊠		Disclosure Statement	Citatiana
	35 USC 113) [Total :		42 [	IDS)/PTO-14) Preliminary <i>A</i>	· ·	Citations
<ol> <li>Oath or Declara a.   ☐ Unexecute</li> </ol>		Pages3]			ipt Postcard (MPEP 503)	
	n a prior application (37	CFR 1.63(d))	' ''-		pecifically itemized)	
	n/divisional with Box 18		15. Certified Copy of Priority Document(s)			
	TION OF INVENTOR(		(if foreign priority is claimed) 16. ☐ Request and Certifications under 35 U.S.C. 122			
	d statement attached o		16. L		d Certifications under 35 U.S Applicant must attach form	s.C. 122
inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).				or its equivalent.		
See 37	CFR 1.03(u)(2) and	1.55(0).	17. [	] Other	or no oquiralorni	
	Data Sheet. See 37					
18. ☐ If a CONTINUIN	NG APPLICATION, chec. endment, or in an Applica	k appropriate box stion Data Sheet	and s	upply the requis	ite information below and in a	
Continuation	Divisional	ation bata sheet ation-in-Part (C	IP) of	prior application	on No.: , filed .	
Prior application info	rmation: Examiner	Group	Art Ur	nit:		
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an					n an	
oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying						
continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
19. CORRESPONDENCE ADDRESS						
□ Customer Number or Bar Code Label 000027777 or □ Correspondence Address below						
Name: Philip S. Johnson, Esq.						
Address: Johnson & Johnson						
One Johnson & Johnson Plaza						
New Brunswick, NJ 08933-7003 USA 20. TELEPHONE CONTACT						
20. TELEPHONE CONTACT Please direct all telephone calls or telefaxes to Louis J. Capezzuto at:						
Telephone: (732) 524-2218 Fax: (732) 524-2808						
21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED						
NAME	Louis J. Capezzuto		J. (, V)		Reg. No. 37,107	<u>.</u>
SIGNATURE	94				<u></u>	
DATE	March 24, 2004					
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# **FEE TRANSMITTAL**

Complete if Known			
Application Number			
Filing Date			
First Named Inventor	Assaf Govari		
Group Art Unit			
Examiner Name			
Attorney Docket Number	BIO-5044		

## **FEE CALCULATION**

#### **CLAIMS AS FILED**

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$770.00
TOTAL CLAIMS	22 - 20 =	2	x 18.00	\$ 36.00
INDEPENDENT CLAIMS	2 - 3 =	0	x 86.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS		N/A	\$290.00	
				\$ 806.00

## **METHOD OF PAYMENT**

- Please charge Deposit Account No. 10-0750/BIO-5044/LJC in the amount of \$806.00. Three copies of this sheet are enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/BIO-5044/LJC. Three copies of this sheet are enclosed.

SUBMITTED BY:			Complete (if applicable)
Typed or Printed Name	Louis J. Capezzuto		Reg. No. 37,107
Frinted Name	Louis J. Capezzuto		Deposit Account
Signature	71	Date: March 24, 2004	No. 10-0750

DOCKET NO. BIO-5044

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Assaf Govari

For : PHASED-ARRAY FOR TISSUE TREATMENT

# Express Mail Certificate

"Express Mail" mailing number: EL 961542680 US

Date of Deposit: March 24, 2004

I hereby certify that this complete application, including specification pages, claims, formal drawings, unexecuted Declaration and Power of Attorney, Information Disclosure Statement and Form 1449 is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Laurie Phillips

(Typed or printed name of person mailing paper or fee)

(Signature of person mailing paper or fee)